

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 423544	RECEIPT DATE:	11 / 12 / 99
CLASSIFICATION NUMBER:	PCT/ EP99 / 01715	FILED FILING DATE:	03 / 16 / 99
FAMILY NAME:	MARIONI	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	ELIO	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	03 / 19 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	32872/GM/CH	COUNTRY:	EPX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	
		FAX	

NAME: MODIANO & ASSOCIATI

STREET: VIA MERAVIGLI 16

CITY: MILANO

STATE/COUNTRY: ITX ZIP: 20123

MAIL:

APPLICATION TITLES:

DEVICE FOR TRANSMITTING MOTION BETWEEN THE ROTOR OF A SYNCHRONOUS
PERMANENT-MAGNET MOTOR AND THE WORKING PART, HAVING AN INCREASED
FREE ROTATION ANGLE

TAB TO LAST POSITION,PUSH SEND

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCK
09/423,544	11/12/99	310	2834	32872/GM/C

APPLICANT

ELIO MARIONI, DUEVILLE, ITALY.

CONTINUING DOMESTIC DATA***
VERIFIED

371 (NAT'L STAGE) DATA***

VERIFIED THIS APPLN IS A 371 OF PCT/EP99/01715 03/16/99

yes & L

FOREIGN APPLICATIONS***

VERIFIED ITALY PD98A000058

03/19/98

yes &

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/10/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> Met after Allowance	STATE OR COUNTRY ITX	SHEETS DRAWING 6	TOTAL CLAIMS 1	INDEP CLAIM 1
Verified and Acknowledged			Examiner's Initials	Initials		

ADDRESS

MODIANO & ASSOCIATI
VIA MERAIGLI 16
20123 MILANO
ITALY

AIR MAIL

TITLE

DEVICE FOR TRANSMITTING MOTION BETWEEN THE ROTOR OF A SYNCHRONOUS
PERMANENT-MAGNET MOTOR AND THE WORKING PART, HAVING AN INCREASED
FREE ROTATION ANGLE

FILING FEE RECEIVED \$840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.75 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.15 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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